

2019 DVCTA HARVESTFEST ENTRY FORM

Official Use Only	Bridle No.
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Competitors are responsible for duplicating their own additional copies of this entry form. This is a 2-sided form; please make 2-sided copies **TYPE OR PRINT CLEARLY -- ONLY ONE HORSE / RIDER or HANDLER PER ENTRY FORM**

Enclose copy of all 2019 DVCTA Membership Cards (Rider/Handler, Owner/Agent)

Competition Name: 2019 DVCTA HARVESTFEST _____ Competition Date(s): September 15, 2019

NAME OF HORSE (Horse MUST be named)	BREED	COUNTRY (Where Bred)	SEX	HEIGHT	COLOR	AGE	DOB
Date of Coggins (must attach copy):	Breed Registration Number:		Check here if this horse is for sale and you want this to be listed in the Program _____				
Sire:	Dam:		Dam's Sire:				
For Dressage Sport Horse Breeding (DSHB) classes, Sire, Dam, Dam's Sire & Breeder names required for ALL breed registered horses & recommended for others.			Breeder:				

Rider/Handler: _____ Primary Phone: _____ Alternate Phone: _____

Rider's Address: _____

Rider/Handler E-Mail: _____ Citizenship*: _____

Owner: _____ Primary Phone: _____ Alternate Phone: _____

Owner's Address: _____ E-Mail: _____ Trainer: _____

Trainer's Address: _____

Coach: _____ Trainer's Phone during Competition: _____

HORSE	RIDER/HANDLER	OWNER (At least one)	TRAINER	COACH (if applicable)
	dvcta#	dvcta#		
LOCAL ASSN #	<p>All USEF members (including riders, handlers, trainers, coaches, owners, agents or lessees) are required to submit proper membership documentation to the show secretary prior to competing. Exhibitors who do not send a copy of their card with their entry or are unable to produce the card when registering at the competition, or for whom the competition cannot verify such information (with the exception of Federation measurement cards) will be required to pay a \$45 Show Pass fee which is non-refundable. EACH Junior and Senior participant (rider, handler, trainer, coach and one owner/agent per horse) is required to be a USEF Active "Competing" Member or pay a \$45 Show Pass fee (see the official USEF Show Pass Statement in prize list). Non-U.S. citizen participants in Dressage/DSHB classes MUST attach current proof, in English, of current membership in good standing in their own N.F in order to be exempt from USEF Show Pass fees.</p>			
<p>Unless show provides entry verification service: * MUST attach copies of USEF & USDF Horse Recording and Registration Certificates for GAIG/USDF Qualifying and Championship Classes. * MUST include a copy of USEF Amateur Certification if competing as an Adult Amateur. Go to http://www.eqverification.org/ to print copies.</p>				

Class #	Day	Class Name (Level/Division/Test - if TOC)	GAIG Fee	Fee
SUBTOTAL Class Fees				

Payment For	Fee	Office Use
Subtotal, Class Fees		
Office Fee	\$10	
EMT FEE PER HORSE/RIDER COMBO	\$ 7.00	
DVCTA Non-Member Fee(s) (\$10.00 per rider/owner)		
Late Fee ADD TO ALL RECEIVED AFTER RECEIVED BY DATE \$25.00		
Other Fee(s)		

JR or YR Birthdate: _____ Riders are eligible to compete as a Jr/YR until the end of the calendar year in which they reach the age of 21

TOTAL FEES DUE: _____

US Equestrian Federation, Inc. Entry Agreement I have read the United States Equestrian Federation, Inc. (the "Federation") Entry Agreement (GR906.4) as printed in the Prize List for DVCTA HarvestFest ("Competition") and agree to all of its provisions. I understand and agree that by entering this Competition, I am subject to Federation Rules, the Prize List, and local rules of the competition. I agree to waive the right to the use of my photos at the competition, and agree that any actions against the Federation must be brought in New York State.

Federation Release, Assumption of Risk, Waiver and Indemnification *This document waives important legal rights. Read it carefully before signing.* I AGREE in consideration for my participation in this Competition to the following:

I AGREE that the "Federation" and "Competition" as used herein includes the Licensee and Competition Management, as well as all of their officials, officers, directors, employees, agents, personnel, volunteers and Federation affiliates. I AGREE that I choose to participate voluntarily in the Competition with my horse, as a rider, driver, handler, vaulter, longeur, lessee, owner, agent, coach, trainer, or as parent or guardian of a junior exhibitor. I am fully aware and acknowledge that horse sports and the Competition involve inherent dangerous risks of accident, loss, and serious bodily injury including broken bones, head injuries, trauma, pain, suffering, or death. ("Harm"). I AGREE to hold harmless and release the Federation and the Competition from all claims for money damages or otherwise for any Harm to me or my horse and for any Harm of any nature caused by me or my horse to others, even if the Harm arises or results, directly or indirectly, from the negligence of the Federation or the Competition. I AGREE to expressly assume all risks of Harm to me or my horse, including Harm resulting from the negligence of the Federation or the Competition. I AGREE to indemnify (that is, to pay any losses, damages, or costs incurred by) the Federation and the Competition and to hold them harmless with respect to claims for Harm to me or my horse, and for claims made by others for any Harm caused by me or my horse while at the Competition. I have read the Federation Rules about protective equipment, including GR801 and, if applicable, EV114, and I understand that I am entitled to wear protective equipment without penalty, and I acknowledge that the Federation strongly encourages me to do so while WARNING that no protective equipment can guard against all injuries. If I am a parent or guardian of a junior exhibitor, I consent to the child's participation and AGREE to all of the above provisions and AGREE to assume all of the obligations of this Release on the child's behalf I represent that I have the requisite training, coaching and abilities to safely compete in this competition. I AGREE that if I am injured at this competition, the medical personnel treating my injuries may provide information on my injury and treatment to the Federation on the official USEF accident/injury report form. BY SIGNING BELOW, I AGREE to be bound by all applicable Federation Rules and all terms and provisions of this entry blank and all terms and provisions of this Prize List. If I am signing and submitting this Agreement electronically, I acknowledge that my electronic signature shall have the same validity, force and effect as if I affixed my signature by my own hand.

*RIDER/HANDLER (mandatory)	*OWNER / AGENT (mandatory)	*TRAINER (mandatory)	COACH (If applicable)
Signature:	Signature:	Signature (must be 18 or older):	Signature:
Print:	Print:	Print:	Print:
PARENT/GUARDIAN (Required if rider/handler is a minor, i.e. under 18)		(Home/Parent) Emergency Contact Is RIDER a U.S. citizen? (mandatory)	
Signature:	Print:	Phone #	YES _____ NO _____

* No entry is valid without original signatures from the above individuals; Photocopied signatures or writing "same" are NOT acceptable.

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Contact NAME and NUMBER for Rider Emergency:	Contact NAME and NUMBER for Horse Emergency:
_____ / _____	_____ / _____
Horse Name	
If accompanied by NON-COMPETING HORSE, must complete separate entry form and pay all applicable fees.	
Tack	n/a
<p>SEND COPY OF SCORE SHEETS FROM APPROVED DVCTA SHOW AS PROOF OF QUALIFICATIONS FOR CHAMPIONSHIP CLASS(ES)</p> <p>ALL ENTRIES MUST HAVE CURRENT COGGINS & FLU / RHINO VACCINATION HISTORY</p> <p>ENTER ON LINE AT DVCTA.ORG OR MAIL COMPLETED ENTRY FORM TO: DVCTA C/O DARCY MILLER 210 WHITE HORSE ROAD COCHRANVILLE PA 19330</p>	

<p>ENTRY PREPARATION CHECKLIST</p> <p><i>Before Mailing, Be Sure You Have:</i></p> <p>___ Completed Both Sides of Entry Form</p> <p>___ All Original Required Signatures</p> <p>___ Enclosed a Copy of the Current Negative Coggins (EIA) Certificate (Refer to Show Specifications for Date Validity Requirements. Copy must be legible.)</p> <p>___ Supplied all Required Ass'n Numbers</p> <p>___ Enclosed Copies of Applicable USEF and/or USDF Cards or Documents</p> <p>___ Completed the Stabling / Camper Vaccination Certificate</p> <p>___ Enclosed a Check / Money Order for all Applicable Fees.</p> <p>___ Attached photocopy of Test(s) verifying USDF & FEI Freestyle Test eligibility (ex. for exempt classes)</p> <p>Mail this Entry Form, Supplemental Documents, and Fees to the Competition (Entry) Secretary Identified on the Prize List.</p> <p>EMERGENCY CELL CONTACT # OF SOMEONE WITH YOU /YOUR GROUP AT THIS SHOW WHO IS NOT LISTED ELSEWHERE ON THIS ENTRY FORM</p>

PLEASE SUBMIT ANY IMPORTANT INFORMATION FOR THE ANNOUNCER ON A SEPARATE SHEET